

**Experiment Number:** 20540-02  
**Test Type:** 150-DAY  
**Route:** Gavage  
**Species/Strain:** Rat/F344/N Tac

**P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL**  
**Test Compound:** Methyleugenol (TGMX rat liver evaluation)  
**CAS Number:** 93-15-2

**Date Report Requested:** 10/20/2014  
**Time Report Requested:** 20:07:42  
**First Dose M/F:** NA / NA  
**Lab:** BAT

**C Number:** C20540C  
**Lock Date:** 08/01/2007  
**Cage Range:** All  
**Date Range:** All  
**Reasons For Removal:** All  
**Removal Date Range:** All  
**Treatment Groups:** All  
**Study Gender:** Male  
**PWG Approval Date** NONE

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Lab: BAT

**F344/N Tac Rat Male**  
**0 mg/kg**

| DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ANIMAL ID   | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|             | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 |
|             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 2 | 2 |
|             | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 |
|             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

**\*TOTALS****Alimentary System**

|                                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |     |     |     |     |     |        |
|---------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----|-----|-----|-----|-----|--------|
| Esophagus                             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +   | +   | +   | +   | +   | 12     |
| Intestine Large, Cecum                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +   | +   | +   | +   | +   | 12     |
| Intestine Large, Colon                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +   | +   | +   | +   | +   | 12     |
| Intestine Large, Rectum               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +   | +   | +   | +   | +   | 12     |
| Ulcer                                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2   |     |     |     |     | 1 2.0  |
| Intestine Small, Duodenum             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +   | +   | +   | +   | +   | 12     |
| Intestine Small, Ileum                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +   | +   | +   | +   | +   | 12     |
| Intestine Small, Jejunum              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +   | +   | +   | +   | +   | 12     |
| Liver                                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +   | +   | +   | +   | +   | 24     |
| Bile Duct, Hyperplasia                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |     |     |     |     |     | 1 1.0  |
| Fatty Change                          |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 1 | 1 1 | 1 1 | 1 1 | 1 1 | 1 1    |
| Hepatodiaphragmatic Nodule            |   |   |   |   |   |   |   |   |   |   |   |   |   | X |     |     |     | X   |     | 2      |
| Infiltration Cellular, Mononuclear Cl | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1   | 1   | 1   | 1   | 1   | 24 1.0 |
| Mitotic Alteration                    | 2 | 1 | 1 | 2 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1   | 1   | 1   | 1   | 1   | 11 1.2 |
| Pancreas                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +   | +   | +   | +   | +   | 12     |
| Salivary Glands                       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +   | +   | +   | +   | +   | 12     |
| Stomach, Forestomach                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +   | +   | +   | +   | +   | 12     |
| Stomach, Glandular                    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +   | +   | +   | +   | +   | 12     |

**Cardiovascular System**

|              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Blood Vessel | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Heart        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 12 |

\* ..Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade

+ ..Tissue examined microscopically

M ..Missing tissue

X ..Lesion present

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**Time Report Requested:** 20:07:43

**First Dose M/F:** NA / NA

## Lab: BAT

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Lab: BAT

**F344/N Tac Rat Male**  
**0 mg/kg**

| DAY ON TEST | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 1 1 1 1 1 1 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|-------------|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
|             | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 1 1 1 1 1 1 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| ANIMAL ID   | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 1 1 1 1 1 1 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|             | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 1 1 1 1 1 1 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|             | 3 3 3 3 3 3 5 5 5 5 5 5 5 5 5 5 5 5 0 0 0 0 0 0 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|             | 8 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|             | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 1 1 1 1 1 1 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|             | 1 2 3 4 5 6 7 8 9 0 1 2 3 4 5 6 7 8 9 0 1 2 3 4 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

\*TOTALS

**Hematopoietic System**

|                          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |        |
|--------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------|
| Bone Marrow              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 12     |
| Lymph Node, Mandibular   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 12     |
| Lymph Node, Mesenteric   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 12     |
| Hyperplasia, Histiocytic | 1 | 2 | 2 | 1 | 2 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 11 1.3 |
| Spleen                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 12     |
| Thymus                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 12     |

**Integumentary System**

|               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Mammary Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Skin          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 12 |

**Musculoskeletal System**

|      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Bone | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
|------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

**Nervous System**

|       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Brain | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
|-------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

**Respiratory System**

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |       |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-------|
| Lung  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 12    |
| Alveolus, Infiltration Cellular, Histiocyte |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 1.0 |
| Hemorrhage                                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 1.0 |
| Inflammation, Chronic                       | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 6 1.0 |
| Nose  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 12    |

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First Dose M/F: NA / NA

Lab: BAT

**F344/N Tac Rat Male**  
**0 mg/kg**

| DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ANIMAL ID   | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|             | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 |
|             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 2 | 2 |
|             | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 |

**\*TOTALS**

Inflammation, Chronic 1 1 2 1.0

Trachea + + + + + + + + + + + + + + + + 12

Inflammation, Chronic 1 1 2 1.0

**Special Senses System**

Eye + + + + + + + + + + + + + + + + 12

Harderian Gland + + + + + + + + + + + + + + + + 12

Inflammation, Chronic 1 1 2 1.0

**Urinary System**

Kidney + 24

Infiltration Cellular, Mononuclear Cl 1 1 1 1 4 1.0

Mineralization 1 1 1 1 4 1.0

Nephropathy 1 1 1 1 1 1 1 1 8 1.0

Urinary Bladder + 12

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**F344/N Tac Rat Male**  
**MEG 150 mg/kg**

| DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ANIMAL ID   | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|             | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 |
|             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 2 | 2 |
|             | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 |
|             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

\*TOTALS

**Alimentary System**

|                                       |   |        |
|---------------------------------------|---|--------|
| Esophagus                             | + | 12     |
| Intestine Large, Cecum                | + | 12     |
| Intestine Large, Colon                | + | 12     |
| Intestine Large, Rectum               | + | 12     |
| Intestine Small, Duodenum             | + | 12     |
| Intestine Small, Ileum                | + | 12     |
| Intestine Small, Jejunum              | + | 12     |
| Liver                                 | + | 24     |
| Clear Cell Focus                      | X X   | 3      |
| Fatty Change                          | 1   | 12 1.0 |
| Hepatodiaphragmatic Nodule            | X   | 1      |
| Infiltration Cellular, Mononuclear CI | 1   | 24 1.0 |
| Mitotic Alteration                    | 2 2 2 2 1 2 1 1 1 2 2 2                     | 12 1.7 |
| Pancreas                              | + | 12     |
| Atrophy                               |   | 1 1.0  |
| Inflammation, Chronic                 |   | 1 1.0  |
| Salivary Glands                       | + | 12     |
| Stomach, Forestomach                  | + | 12     |
| Stomach, Glandular                    | + | 12     |
| <b>Cardiovascular System</b>          |   |        |
| Blood Vessel                          | + | 12     |

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Lab: BAT

**F344/N Tac Rat Male**  
**MEG 150 mg/kg**

| DAY ON TEST                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | *TOTALS |     |
|-----------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---------|-----|
|                             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |         |     |
| ANIMAL ID                   | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |         |     |
| Heart                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 12      |     |
| Cardiomyopathy              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 11      | 1.1 |
| <b>Endocrine System</b>     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |         |     |
| Adrenal Cortex              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 12      |     |
| Vacuolization Cytoplasmic   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 6       | 1.0 |
| Adrenal Medulla             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |         |     |
| Islets, Pancreatic          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 12      |     |
| Parathyroid Gland           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 12      |     |
| Pituitary Gland             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 11      |     |
| Thyroid Gland               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 12      |     |
| <b>General Body System</b>  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |         |     |
| NONE                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |         |     |
| <b>Genital System</b>       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |         |     |
| Epididymis                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 12      |     |
| Preputial Gland             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 12      |     |
| Inflammation, Chronic       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 8       | 1.3 |
| Prostate                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 12      |     |
| Seminal Vesicle             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 12      |     |
| Testes                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 12      |     |
| <b>Hematopoietic System</b> |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |         |     |
| Bone Marrow                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 12      |     |

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**MEG 150 mg/kg**

| DAY ON TEST                                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | *TOTALS |     |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---------|-----|
|   | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0  |         |     |
| ANIMAL ID                                   | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0  |         |     |
|   | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0  | 0       |     |
|   | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9  | 9       |     |
|   | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 2  | 2       |     |
|   | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0  | 1       |     |
| Bone Marrow                                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 12 |         |     |
| Lymph Node, Mandibular                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 12 |         |     |
| Lymph Node, Mesenteric                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 12 |         |     |
| Hyperplasia, Histiocytic                    | 1 | 1 | 1 | 1 | 2 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1  | 10      | 1.1 |
| Spleen                                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 12 |         |     |
| Thymus                                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 12 |         |     |
| <b>Integumentary System</b>                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |         |     |
| Mammary Gland                               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 12 |         |     |
| Skin  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 12 |         |     |
| <b>Musculoskeletal System</b>               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |         |     |
| Bone  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 12 |         |     |
| <b>Nervous System</b>                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |         |     |
| Brain                                       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 12 |         |     |
| <b>Respiratory System</b>                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |         |     |
| Lung  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 12 |         |     |
| Alveolus, Infiltration Cellular, Histiocyte | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1       | 1.0 |
| Inflammation, Chronic                       | 1 | 1 | 1 | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 8       | 1.3 |
| Nose  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 12 |         |     |
| Trachea                                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 12 |         |     |
| Inflammation, Chronic                       | 1 | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  | 3       | 1.0 |

\* ..Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade

+ ..Tissue examined microscopically

M ..Missing tissue

X ..Lesion present

A ..Autolysis precludes evaluation

I ..Insufficient tissue

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

- 1) Minimal
- 2) Mild
- 3) Moderate
- 4) Marked

Experiment Number: 20540-02

Test Type: 150-DAY

Route: Gavage

Species/Strain: Rat/F344/N Tac

## P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Test Compound: Methyleugenol (TGMX rat liver evaluation)

CAS Number: 93-15-2

Date Report Requested: 10/20/2014

Time Report Requested: 20:07:44

First Dose M/F: NA / NA

Lab: BAT

**F344/N Tac Rat Male**  
**MEG 150 mg/kg**

| DAY ON TEST | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 1 1 1 1 1 1 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|-------------|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
|             | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 5 5 5 5 5 5 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| ANIMAL ID   | 0 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|             | 0 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|             | 3 3 3 3 3 3 5 5 5 5 5 5 1 1 1 1 1 1 1 1 1 1 1 1 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|             | 9 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|             | 0 0 0 0 0 0 0 0 0 0 0 0 1 1 1 1 1 1 1 1 1 1 1 1 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|             | 1 2 3 4 5 6 7 8 9 0 1 2 3 4 5 6 7 8 9 0 1 2 3 4 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|             | 2 2 2 2 2 2 3 4 5 6 7 8 9 0 1 2 2 2 2 2 2 2 2 2 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|             | 4 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**\*TOTALS****Special Senses System**

|                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |       |
|-----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-------|
| Eye                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 12    |
| Harderian Gland       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 12    |
| Inflammation, Chronic |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 1.5 |

**Urinary System**

|                                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |       |
|---------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-------|
| Kidney                                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 24    |
| Infiltration Cellular, Mononuclear Cl |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 4 1.0 |
| Mineralization                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 1.0 |
| Nephropathy                           |   |   |   |   |   |   | 1 |   |   |   |   |   |   |   |   |   |   |   |   | 6 1.0 |
| Urinary Bladder                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 12    |

**\*\*\*END OF MALE DATA\*\*\***

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**Lab:** BAT

\*\* END OF REPORT \*\*

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